STATE OF HAWAII STATE ETHICS COMMISSION



FORM GD1 (Rev. 5/2013)

VIA EMAIL



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

he period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

FILER	_		
Louie	Dav		М.
ast Name	First N		M.I.
Department of the Atte	orney General	Attorney Gen	eral
State Agency	`	State Position	
CONTACT INFORMATION			
425 Queen Street			
lumber and Street or P.O. Box			
Honolulu	1	HI	96813
City	·	State	Zip Code
(808) 586-1282	davi	d.m.louie@hawaii.gov	
elephone	Extension Email.	Address	
SIFT INFORMATION (LIST E	·		
Donor: Gov't of Turkey/Turkish Coalition of America			
Gift (Description): trave	I costs for myself and n	ny wife	Value/Cost: \$6,118.00
	't of Israel/America-Israel Friendship		Nov. 8-14, 2012
Gift (Description): trave	l costs for myself		Value/Cost: \$4,000.00
3. Donor;			
Gift (Description):			Value/Cost:
Donor:		Date Received: _	
Gift (Description):			Value/Cost:
5. Danor:		Date Received:	
Gift (Description):			Value/Cost:
Check here if additional s	heets are attached		
FILER			
David M. Louie			6/14/2013
Print Name of Filer (First M.I. Last)			Date (m/d/yyyy)

knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.